

October 26, 2000

Release of the Department of Veterans Affairs On-Line Web-Based 10-10EZ, Application for Health Benefits

1. PURPOSE: This Veterans Health Administration (VHA) Directive announces the release of the Department of Veterans Affairs' (VA) on-line Web-Based 10-10EZ, Application for Health Benefits, and provides instructions regarding procedures for processing applications submitted on line.

2. BACKGROUND: The electronic 10-10EZ project enables application for VA health care benefits using Web-Based technology and is intended to maximize convenience for veterans. The electronic 10-10EZ will help VA to continue to be proactive in meeting veterans desire for electronic service delivery as well as support the emphasis given to this sort of initiative by the White House.

3. POLICY: On November 1, 2000, VHA will implement nationwide the "on-line" Web Based 10-10EZ, Application for Health Benefits, which will support the following processes:

- a. Completion of an on-line 10-10EZ application at www.va.gov/1010ez.htm.
- b. Ability to print the information for mailing.
- c. Electronic transmission of the information to a VA "Parent" health care facility.
- d. The establishment of a 10-10EZ mailgroup at each "Parent" VA health care facility.

4. ACTION

a. Each field facility must load patch DG*5.3*325 no later than October 31, 2000. This patch will allow transmission of on line forms to a 10-10EZ mail group at each parent facility. Since the patch requires messages initially go to a designated individual, each facility must assign an Enrollment Coordinator (or equivalent) prior to loading of the patch. Should a facility not determine a contact point prior to October 31, 2000, local Information Resources Management/Chief Information Office (IRM/CIO) officials will coordinate with the Facility director to obtain an initial contact point. Once the patch is loaded, the designated individual can enroll additional members to the mail group according to facility requirements.

b. The "parent" medical facility will receive application data via VistA in text format addressed to the 10-10EZ mail group.

THIS VHA DIRECTIVE EXPIRES APRIL 1, 2001

VHA DIRECTIVE 2000-041
October 26, 2000

(1) If veteran indicates a printed, signed form is being mailed or faxed, the Enrollment Coordinator or designated employee will suspense the message for 30 days. If the signed 10-10-10EZ does not arrive within that period, the facility will print the VistA message, attach a cover letter (Attachment A) indicating the veteran has 30 days to review the information, make any changes, sign, and return the document. The veteran will also be informed that if the completed information is not received by the facility within 30 days the application may be deleted. The Facility will again suspense the message. If the facility does not have a completed and signed document after 60 days, the VistA e-mail may be deleted.

(2) Should the veteran indicate the application was not printed and mailed, the receiving facility will print within five days of receipt, the VistA e-mail document and send, with cover letter (Attachment B), to the veteran for verification and signature. The facility will suspense for 30 days at which time if the form is not returned back, another form will be printed and mailed with cover letter (attachment C) indicating the veteran has 30 days to review, sign and return. This letter will also include a warning that failure to return the completed and signed form within 30 days, may result in the facility deleting the application.

(3) Facilities will not enter information into VistA until a completed and signed document is received. Upon receipt of such a document, the facility will manually enter data into VistA. The original transmission displays veteran data in the order required for data entry. The facility will follow local policy regarding disposition of the signed 10-10EZ information.

4. REFERENCE: None.

5. FOLLOW-UP RESPONSIBILITY: The Director, Health Administration Services (10C3), is responsible for the content of this directive.

6. RESCISSION: This VHA Directive will expire April 1, 2001.

Thomas L. Garthwaite, M.D.
Under Secretary for Health

Attachments

DISTRIBUTION: CO: E-mailed 10/27/2000
FLD: VISN, MA, DO, OC, OCRO, and 200 - FAX 10/27/2000
EX: Boxes 104, 88, 63, 60, 54, 52, 47, and 44 – FAX 10/27/2000

ATTACHMENT A

**VHA DIRECTIVE 2000-041
October 26, 2000**

Sample Letter A

Dear (veteran's name),

Our records indicate you have completed an electronic, Web-based 10-10EZ, Application for VA Health Benefits. Unfortunately, as of this date we have not received the signed and printed form you noted during the application process that you would be mailing to us. Therefore, we have sent the enclosed document to you.

Should you still be interested in VA health care please carefully review the information, make any changes directly on the form, sign and mail it to the address above (attn: contact point/section, etc.) within 30 days. Although this document is in text format it contains the same information you provided during the on-line application process. Unfortunately, we cannot continue your enrollment for VA health care benefits until we receive the signed document. If we do not receive the signed document within 30 days your application may be deleted from the Web-Based system.

If available, please include a copy of your discharge papers (DD-214) when you return the above information. This will help us further expedite your application.

Thank you for choosing the VA for your health care needs. Should you have any questions regarding this matter please contact (name and title) at (telephone number).

Sincerely,

Enclosure

ATTACHMENT B

**VHA DIRECTIVE 2000-041
October 26, 2000**

Sample letter B

Dear (veteran's name),

We recently received notification that you have applied for VA health care via our electronic Web-based 10-10EZ, Application for VA Health Benefits.

It is our understanding that you were either unable, or chose not, to print the form when you were completing the application. Therefore, we have forwarded the enclosed document to you. Although this document is in a text based format it contains the same information you provided during the on-line application process. Please review the information carefully, make any changes directly on the form, sign, and mail to the address above (attn: contact point/section etc) within 30 days. Unfortunately, we cannot continue your enrollment until we receive the signed document.

If available, please include a copy of your discharge papers (DD-214) when you return the above document. This will help us further expedite your application.

Thank you for choosing the VA for your health care needs. Should you have any questions regarding this matter please contact (name and title) at (telephone number).

Sincerely,

Enclosure

Sample Letter C

Dear (veteran's name),

Our records indicate we have previously forwarded you a document for review and signature in response to your on-line 10-10EZ, Application for VA Health Benefits. As of this time we are not in receipt of your signed application.

We have again enclosed a copy of the form previously sent to you for review and signature. Although this document is in text format it contains the same information you provided during the on-line application. Please carefully review it, make any changes directly on the form, sign, and return to the address above (attn: contact person/section, etc.) within the next 30 days. Unfortunately, we cannot continue your application for VA Health Care until we receive your signed document. If we do not receive the form within 30 days your application may be deleted.

Thank you for choosing the VA for your health care needs. Should you have any questions regarding this matter please contact (name and title) at (telephone number).

Sincerely,

Enclosure